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|---|-------------|--|--|--|----|---|----|--|-------------|--|----|--|----|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>   |             | <b>Attorney Docket Number</b><br>MTP-012C4   |  |  |    |   |    |  |             |  |    |  |    |
|   |             | In re Application of Beausang <i>et al.</i>  |  |  |    |   |    |  |             |  |    |  |    |
|   |             | Application Serial No. 10/694,629  |  |  |    |   |    |  |             |  |    |  |    |
|   |             | Filed: October 27, 2003  |  |  |    |   |    |  |             |  |    |  |    |
| Group Art Unit: 1648  |             | Examiner: Salimi, Ali Reza   |  |  |    |   |    |  |             |  |    |  |    |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows<br/>(check time period desired)</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$ 1,020.00</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: _____.</p> <p><input checked="" type="checkbox"/> A check for the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 07-1700. Enclosed is a duplicate of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 07-1700.</p> <p><input checked="" type="checkbox"/> Return receipt postcard enclosed.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.<br/><input type="checkbox"/> applicant.<br/><input checked="" type="checkbox"/> attorney or agent of record.<br/><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br/>Registration number if acting under 37 CFR 1.34(a). _____.</p> |             |  |  | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ | <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 1,020.00 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$          |  |  |  |    |   |    |  |             |  |    |  |    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$          |  |  |  |    |   |    |  |             |  |    |  |    |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$ 1,020.00 |  |  |  |    |   |    |  |             |  |    |  |    |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$          |  |  |  |    |   |    |  |             |  |    |  |    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$          |  |  |  |    |   |    |  |             |  |    |  |    |
| <b>CORRESPONDENCE ADDRESS</b>   |             | <b>SIGNATURE BLOCK</b>   |  |  |    |   |    |  |             |  |    |  |    |
| Direct all correspondence to: Patent Administrator<br>Goodwin Procter LLP<br>Exchange Place<br>Boston, MA 02109<br>Tel. No.: (617) 570-1000<br>Fax No.: (617) 523-1231<br>Customer No. 051414   |             | Respectfully submitted,<br><br>Duncan A. Greenhalgh<br>Attorney for Applicant<br>Goodwin Procter LLP<br>Exchange Place<br>Boston, MA 02109 |  |  |    |   |    |  |             |  |    |  |    |

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